



# Incident Report

**Print Date/Time:** 02/08/2016 14:00  
**Login ID:** ss0139

Lake Stevens Police Department  
**ORI Number:** WA0311900

**Incident:** 2016-00002222

**Incident Date/Time:** 2/3/2016 12:44:00 PM  
**Location:** 4TH ST SE / SR 9 SE  
#Error  
**Phone Number:** (425) 343-5381  
**Report Required:** No  
**Prior Hazards:** No  
**LE Case Number:**

**Incident Type:** #Error  
**Venue:** Lake Stevens  
**Source:** #Error  
**Priority:** 3  
**Status:** #Error  
**Nature of Call:**

## Unit/Personnel

Unit	Personnel
19D2	SS0136-Shein
19D3	SS0135-Parnell

## Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	#Error	#Error	#Error		#Error	#Error	

## Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
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## Disposition(s)

Disposition	Count
#Error	1

## Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
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**02/03/2016 : 12:46:58 SP0112 Narrative: CC HIT AND RUN RED FULL SIZE CHEVY PU W/REAR END DAMAGE-RP IN A  
RED MAZDA RX8 - FLEEING VEH WB 4TH ST SE-TIME DELAY 10 MINS**



# LAKE STEVENS POLICE DEPARTMENT

## INCIDENT STATEMENT FORM

CASE NUMBER 16-2222VICTIM ☐ WITNESS ☒NON-DISCLOSURE ☐

NAME (LAST, FIRST, MIDDLE) <u>Purvis, Jennifer, Susan</u>		RACE	ETHNICITY	SEX	D.O.B. <u>1/15/75</u>	AGE	HGT	WGT	HAIR	EYES
STREET ADDRESS <u>6011 95th Dr Se</u>				CITY <u>Snohomish</u>		STATE <u>WA</u>		ZIP <u>98290</u>		
HOME PHONE <u>360 568-7688</u>		CELL PHONE <u>425-343-5381</u>			WORK PHONE					
EMAIL ADDRESS (OPTIONAL)					PLACE OF EMPLOYMENT					

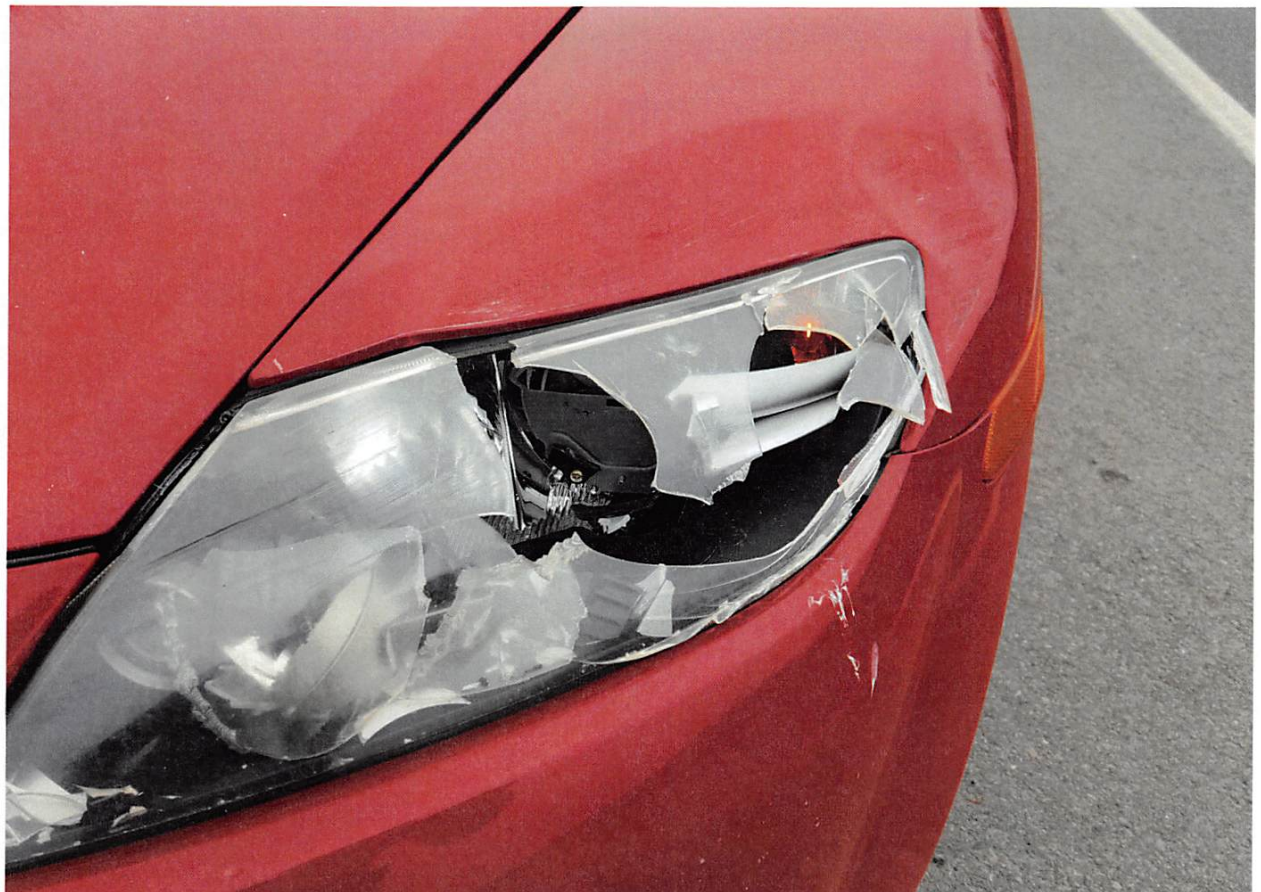
## STATEMENT:

I was driving south bound on highway 9 when a red Chevy truck pulled out in front of me to cross the highway. He was heading east on 4th Street. I pulled to the shoulder after I hit the back end of his truck. He stopped and turned around saw me get out of my car and then he headed back across highway 9 going west on 4th Street. He did not stop to exchange information.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>[Signature]</u>	DATE SIGNED: <u>2/3/16</u>
OFFICER/NUMBER: <u>Shein #136</u>	DATE SIGNED: <u>2/3/16</u>

OUR MISSION STATEMENT: "WE BELIEVE THAT PRESERVING LIFE, ENSURING JUSTICE AND GUARDING DEMOCRACY ARE VITAL TO A SAFE, HEALTHY, AND PROSPEROUS COMMUNITY"





## Collision Supplemental

STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT

1591971

REPORT NO. **E513165**CASE # **16-2222**LOCAL AGENCY  
CODINGTOTAL # OF  
UNITS **01**OBJECT  
STRUCKTRIBAL  
RESERVATION

M M D D Y Y Y Y TIME (2400) COUNTY # MILES CITY #  
DATE OF COLLISION **02** - **03** - **2016** **1244** **31** N ☐ E ☐ IN ☒ S ☐ W ☐ OF **0664**

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☒ NON-INTERSECTION ☐**SR9**BLOCK NO. ☒**400**

MILE POST

DISTANCE

OF (REFERENCE OR CROSS STREET)

MILES ☐ N ☐ E ☐ S ☐ W **4TH ST SE**

UNIT 01

MOTOR  
VEHICLE ☒PEDAL-  
CYCLE ☐DAMAGE THRESHOLD MET  
YES ☐ NO ☒

PHONE

**D: 4253435381**

LAST NAME

**PURVIS**

FIRST NAME

**JENNIFER**MIDDLE  
INITIAL**S**STREET  
NEW ADDRESS**6011 95TH DR SE**

CITY

**SNOHOMISH**

ST

**WA**

ZIP

**98290**

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S  
LICENSE #

STATE

SEX

**U**D.O.B.  
MMDDYYYY**01****15****1975**ON DUTY ☐

STATUS

AIRBAG

**2**

RESTR.

**4**

EJECT

**1**HELMET  
USE**2**INJURY  
CLASS**1**

NATURE OF INJURIES

LICENSE  
PLATE #**ASA4614**

STATE

**WA**

VIN#

**JM1FE173740118988**TRAILER  
PLATE #

STATE

TRAILER  
PLATE #

STATE

VEH. YEAR

**2004**

MAKE

**MAZD**

MODEL

**RX8**

STYLE

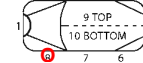
**C4**VEHICLE TOWED  
YES ☐ NO ☒

TOWED BY

GOVT. VEHICLE  
YES ☐ NO ☒REGISTERED OWNER INFO. **JENNIFER PURVIS 6011 95TH DR SE SNOHOMISH WA 98290 D: 4253435381**LIABILITY INSURANCE  
IN EFFECT ☒INSURANCE CO  
& POLICY # **STATE FARM 1234**VEHICLE  
LEGALLY  
STANDING YES ☐ NO ☐

CITATION #

CHARGE

VEHICLE NO. 1  
SHADE IN DAMAGED AREA

UNIT 02

MOTOR  
VEHICLE ☐PEDAL-  
CYCLE ☐PEDESTRIAN ☐PROPERTY  
OWNER ☐DAMAGE THRESHOLD MET  
YES ☐ NO ☐

PHONE

LAST NAME

FIRST NAME

MIDDLE  
INITIALSTREET  
NEW ADDRESS

CITY

ST

ZIP

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S  
LICENSE #

STATE

SEX

D.O.B.  
MMDDYYYY**15****1975**ON DUTY ☐

STATUS

AIRBAG

**2**

RESTR.

**4**

EJECT

**1**HELMET  
USE**2**INJURY  
CLASS**1**

NATURE OF INJURIES

LICENSE  
PLATE #

STATE

VIN#

TRAILER  
PLATE #

STATE

TRAILER  
PLATE #

STATE

VEH. YEAR

MAKE

MODEL

STYLE

VEHICLE TOWED  
YES ☐ NO ☒

TOWED BY

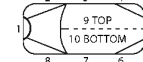
GOVT. VEHICLE  
YES ☐ NO ☒

REGISTERED OWNER INFO.

LIABILITY INSURANCE  
IN EFFECT ☐INSURANCE CO  
& POLICY #VEHICLE  
LEGALLY  
STANDING YES ☐ NO ☐

CITATION #

CHARGE

VEHICLE NO. 2  
SHADE IN DAMAGED AREA

OFFICER'S NAME (PRINT)

**G. SHEIN**

BADGE OR ID #

**0136**

AGENCY

**WA0311900**


**STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT**


1591972

CORRECTION

REPORT NO. **E513165**CASE # **16-2222**
**ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)**

NAME (LAST, FIRST, MIDDLE INITIAL)																							
ADDRESS & PHONE #												SEX	D.O.B. MMDDYYYY										
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES					
NAME (LAST, FIRST, MIDDLE INITIAL)																							
ADDRESS & PHONE #												SEX	D.O.B. MMDDYYYY										
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES					
NAME (LAST, FIRST, MIDDLE INITIAL)																							
ADDRESS & PHONE #												SEX	D.O.B. MMDDYYYY										
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES					

**NARRATIVE**

Please see subsequent narrative pages

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

**G. SHEIN**
**02-05-16 11:30 AM**

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

**ROBERT MINER 0095**

DATE

**2/7/2016 2:57:03 AM**

BADGE OR ID #	<b>0136</b>	ORI #	<b>WA0311900</b>	TIME POLICE DISPATCHED	<b>12:44 PM</b>	TIME POLICE ARRIVED	<b>12:50 PM</b>
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REPORT NO. E513165

CASE #

16-2222

DATE AND TIME  
OF COLLISION

02/03/16 12:44

## NARRATIVE

On 02/03/2016 at approximately 1250 hours I, Officer Shein (SS0136) of the Lake Stevens Police Department was on routine patrol in a fully marked patrol vehicle equipped with lights and sirens wearing full duty uniform with shoulder patches and a badge.

I responded to a report of a collision in the 400 block of SR9 Lake Stevens. I arrived and met Jennifer S. Purvis (DOB: 01/15/1975) standing by her 2004 Mazda RX8 ASA4614.

Jennifer said that she was traveling southbound on SR9. A red Chevrolet Silverado with unknown registration number crossed SR9 on 4th Ave SE in front of Jennifer. Jennifer was unable to react quickly enough and struck the red Chevrolet Silverado into the rear pickup bed quarter panel.

She said that the vehicle did not stop and proceeded to turn around, crossed SR9 again and drove off westbound on 4th ST SE at a high rate of speed. Jennifer said that she did not see the registration number of the vehicle.

The driver of the red Chevrolet Silverado did not stop to exchange insurance information. I captured images of the damage to Jennifer's vehicle. There was clear new damage to the headlamp lens with loose plastic pieces.

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING STATEMENTS ARE TRUE AND CORRECT, AND I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT.

Gleb Shein #136  
Officer

2/6/2016  
Date

Lake Stevens, WA  
Location Signed

REPORT NO. E513165

CASE # 16-2222

DATE AND TIME  
OF COLLISION 02/03/16 12:44

